



Waste Discharge Self Monitoring Report

Mail to: Metro, Industrial Waste
130 Nickerson St., Suite 200,
Seattle, WA 98109-1658

Company Name ALASKAN Copper Works Month November 19 93 No. of Employees (per day) Average _____ Maximum _____
Permit No. 7201 Station No. _____ Site No. _____ All units mg/l unless otherwise noted Industry Type _____

Sample Dates (circle)	Sample Type C (composite) or G (grab)	pH		Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide, CNA	Cyanide, CNT	Fats, Oils and Grease (FOG)	Total Toxic Organics (TTO)	Other Parameters			Notes
		Min	Max													Flow (GPD) Total	Flow (GPD) Industrial	Flow (GPD) Specialty	
1																			
2																			
3																			
4																			
5																			
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28																			
29																			
30																			
31																			
Min.																			
Max.																			
Average																			

NOT IN USE THIS MONTH

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[Signature]
Date Dec 8 1993
Date _____
Signature of [Name] Executive or Authorized Agent

Please circle all permit violations Additional Comments _____



Waste Discharge Self Monitoring Report

Mail to: Metro, Industrial Waste
130 Nickerson St., Suite 200,
Seattle, WA 98109-1658

Company Name Alaskan Copper Works

Month November 19 93

No. of Employees (per day) Average _____

Maximum _____

Permit No. 7238

Station No. _____

Site No. _____

All units mg/l unless otherwise noted

Industry Type _____

Sample Dates (circle)	Sample Type C (Composite) or G (Grab)	PH		Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide, CNA	Cyanide, CN, T	Fats, Oils and Grease (FOG)	Total Toxic Organics (TTO)	Other Parameters			Flow (GPD) Total	Flow (GPD) Industrial	Flow (GPD) Specify	Notes
		Min	Max																			
1		10.1	11.9																3042			
2		9.4	10.7																1960			
3		9.2	10.6																2439			
4		9.8	10.1																2925			
5		9.7	10.8																2401			
6																						
7																						
8		9.4	10.8																3187			
9		9.9	10.1																2318			
10		9.9	10.3																2646			
11		9.1	10.6																2265			
12		9.2	9.7																2364			
13																						
14																						
15		9.3	10.3																2904			
16		10.3	10.7																2269			
17		10.6	11.4			1.4	0.2		1.7		0.42								3096			
18		9.8	10.8																3159			
19		9.4	10.5																2960			
20																						
21																						
22		9.5	12.0																2242			
23		9.1	10.3																2115			
24		9.8	11.2																2220			
25																						
26																						
27																						
28																						
29		9.9	9.9																1483			
30		9.9	10.4			1.8	0.1		0.9		1.7								3008			
31																						
Min.																						
Max.																						
Average																						

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[Signature]
Date Dec 8 1993

Signature of Principal Executive or Authorized Agent

Please circle all permit violations

Additional Comments _____